

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY
NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

Felipe P. Abinsay, Jr.

(b) Committee Name:

Friends of Jun Abinsay

(c) Mailing Address:

1260 Richard Lane, #B-516

Honolulu, Hawaii 96819

(d) Phone (Bus)

586-6010

(Res)

841-6598

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

☐ 1st Preliminary Primary ☐ Amended

☐ 2nd Preliminary Primary ☐ Short Form¹

☐ Final Primary

☐ Preliminary General

☐ Final Election Period

☒ Supplemental

REPORTING PERIOD

1/1/99 through 6/30/99

SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section III (Part 2) on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ² (Continuing Committee) OR at the time the Organizational Report was Filed (New Committee).....		
2. Cash on Hand at the Beginning of this Reporting Period.....	2,885.51	
3. Total Receipts with Loans (From Line 17, Column A and B).....	11,422.91	77,128.91
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	14,308.42	77,128.91
5. Total Disbursements (From Line 21, Column A and B).....	8,523.96	71,344.45
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B).....	5,784.46	5,784.46
7. (a) Total of Expenditures and Fundraising Expenditures (Unpaid) at the Beginning of this Reporting Period.....	675.72	
(b) Net Change of Expenditures and Fundraising Expenditures (Unpaid) (From Line 22, Column A).....	440.30	
(c) Total of Expenditures and Fundraising Expenditures (Unpaid) at the Closing of this Reporting Period (Add Lines 7(a) and 7(b)).....	235.42	
8. Total of Loans at the Closing of this Reporting Period (Schedule E, Line 10).....		
9. Debt Owed BY the Candidate Committee at the Closing of this Reporting Period (Add Lines 7(c) and 8).....	235.42	
10. Other Adjustments to Surplus/Deficit (Attach Explanation).....		
11. Subtotal (Add Lines 9 and 10).....	235.42	
12. Surplus/Deficit (Subtract Line 11 from Line 6).....	5,549.04	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Felipe P. Abinsay Jr.

7/30/99

Candidate Signature

Date

Treasurer Signature

Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and received no contributions, made no expenditures, and had a deficit or surplus of \$2,000 or less for the reporting period. Short form reporting requires completion of only Section I, Section II, and Section III (Part 1) of this Disclosure Report.
² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
BY INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES
CANDIDATE COMMITTEE**

REMINER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 3

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	*REQUIRED IF AGGREGATE IS \$1,000 OR MORE NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION (IF INDIVIDUAL)		
4/1/99	[] NON-MONETARY CONTRIBUTION Roland J.B. Ylarde, D.D.S. 634 Kalihi St., Suite 203 Honolulu 96819		150.00	
"	[] NON-MONETARY CONTRIBUTION Alliance of Residential Care Home 98-1268 Kaahumanu St., #C-3 Pearl City, 96782	Operators	200.00	
"	[] NON-MONETARY CONTRIBUTION Island Insurance Co., Ltd. PAC 1022 Bethel Street Honolulu 96813		250.00	
"	[] NON-MONETARY CONTRIBUTION IIWU Local 142 451 Atkinson Drive Honolulu 96814-4796		150.00	
"	[] NON-MONETARY CONTRIBUTION Wong's Meat Market, Ltd. 225-1 North Nimitz Highway Honolulu 96817		250.00	
"	[] NON-MONETARY CONTRIBUTION Alexander & Bladwin HI PAC P. O. Box 3340 Honolulu 96801		250.00	
"	[] NON-MONETARY CONTRIBUTION Hawaii Carpenter's Market Recovery Program 1199 Dillingham Blvd., #200 Honolulu 96817		150.00	

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (THIS PAGE)..... 1,400.00

2. TOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A).....

Form CC-3(A) (Rev. 11/97)

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
BY INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES
CANDIDATE COMMITTEE**

REMINER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.
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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 3

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	*REQUIRED IF AGGREGATE IS \$1,000 OR MORE NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION (IF INDIVIDUAL)		
4/7/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION 1st 2nd Mortgage Company 1810 North King Street Honolulu 96819		200.00	
"	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Group Builders, Inc. 2020 Democrat Street Honolulu 96819		250.00	
"	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Farmer's Livestock Cooperatives 94-403 Ukee Street Waipahu 96797		200.00	
"	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Larry Jefts Farm P. O. Box 27 Kunia 96759		200.00	
"	<input type="checkbox"/> NON-MONETARY CONTRIBUTION AES Hawaii, Inc. 91-086 Kaomilo Loop Kapolei 96707		200.00	
5/1/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HSFFA PAC 2305 So. Beretania St., #202 Honolulu 96826		250.00	
5/26/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION David A. Heenan 900 Fort Street Mall #1450 Honolulu 96813-3715		200.00	

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (THIS PAGE)..... 1,500.00
2. TOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION
SCHEDULE A**

**MONETARY AND NON-MONETARY CONTRIBUTIONS
BY INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES
CANDIDATE COMMITTEE**

MINDEN: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.
INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

PAGE 3 OF 3

ANDIDATE AND CANDIDATE COMMITTEE NAME:

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	REQUIRED IF AGGREGATE IS \$1,000 OR MORE NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION (IF INDIVIDUAL)		
6/15/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION AT&T		150.00	
6/18/99	<input type="checkbox"/> NON-MONETARY CONTRIBUTION DOW Agrosiences, LLC P. O. Box 6004 Midland, MI 48641-6004		200.00	
"	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HGEA P. O. Box 2930 Honolulu 96802		250.00	
"	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HGEA P. O. Box 2930 Honolulu 96802 (Assorted Beverages)		131.51	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (THIS PAGE)..... 731.51
 2. TOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE 3,631.51

CS-4(A) (Rev. 11/97)

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

Friends of Jun Abinsay

PAGE 1 OF 2

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
1/15/99	Postmaster Honolulu	Postage - mailing of flyers	716.82
1/29/99	Hawaii's Junior Miss Scholarship Program	donation	100.00
1/20/99	Iluminada Corpuz 3612 Salt Lake Boulevard Honolulu 96818	Catering services on Opening day	325.00
2/22/99	JM Mailing Hawaii 1295 Kaunualii Street Honolulu 96817	Mailing service	527.52
4/19/99	S&F Printing	printing services	364.58
4/15/99	Mabuhay Celebration	donation	250.00
4/20/99	Kalihi YMCA	donation	100.00

- SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 2,383.92
- TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....
- TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A).....

Form CC-5(B) (Rev. 11/97)

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 2

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
1/20/99	Kalola's Flowers and Leis	leis on opening day	55.12
6/7/99	P & A Printers	Pro-rate share of cost of t/shirts for kalihi kids volleyball teams.	281.23
5/14/99	Ilocos Surian Association of Hawaii	donation - Souvenir Book ad	30.00
"	Hawaii Filipino Women's Club	donation - souvenir book ad	30.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 396.35
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4)..... 440.30
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18, COLUMN A)..... 3,220.57

Form CC-5(B) (Rev. 11/97)

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE F
FUNDRAISING EXPENDITURES
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 3

Friends of Jun Abinsay

DATE OF FUNDRAISING EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF FUNDRAISING EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID FUNDRAISING EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
1/19/75	Menehune Water Company 99-1205 Halawa Valley Street Aiea 96701		133.75
3/18/99	Postmaster Honolulu	Postage	165.00
3/31/99	Hawaii Newspapaer Agency	fundraiser ad	665.28
"	JM Mailing Hawaii 1295 Kaunualii Street	printing of fundraiser tickets	296.86
4/7/99	Moke Lum Hoy	reimbursement of fundraiser expenses	177.86
4/8/99	DAV Memorial Hall	hall rental	500.00
"	E&M Sounds, Inc.	entertainment	175.00

1. SUBTOTAL OF FUNDRAISING EXPENDITURES THIS PERIOD (THIS PAGE)..... 2,113.75
2. TOTAL OF UNPAID FUNDRAISING EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 5).....
3. TOTAL OF FUNDRAISING EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 19, COLUMN A).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE F
FUNDRAISING EXPENDITURES
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 3

DATE OF FUNDRAISING EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF FUNDRAISING EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID FUNDRAISING EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
4/15/99	Postmaster Honolulu	postage	33.00
4/16/99	Postmaster Honolulu	postage	33.00
4/08/99	Kalola's Flowers & Leis	leis during fundraiser	103.00
"	Illuminada Corpuz	Catering services	1,350.00
5/28/99	Moke Lum Hoy	reimbursement for incidental expenses	75.45
5/4/99	Fil-Am Courier	ad	104.17
"	Service Printers, Inc.	printing of letterheads and envelopes	278.11

1. SUBTOTAL OF FUNDRAISING EXPENDITURES THIS PERIOD (THIS PAGE)..... 1,976.73
2. TOTAL OF UNPAID FUNDRAISING EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 5).....
3. TOTAL OF FUNDRAISING EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 19, COLUMN A).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE F
FUNDRAISING EXPENDITURES
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 3 OF 3

DATE OF FUNDRAISING EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF FUNDRAISING EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID FUNDRAISING EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
4/8/99	Paradise Beverages, Inc. 94-1450 Moaniani Street Waipahu 96797	donation - fundraiser	81.40
"	HGEA P. O. Box 2930 Honolulu 96802-2930	donation - beverages for fundraiser	131.51

1. SUBTOTAL OF FUNDRAISING EXPENDITURES THIS PERIOD (THIS PAGE)..... 212.91
2. TOTAL OF UNPAID FUNDRAISING EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 5).....
3. TOTAL OF FUNDRAISING EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 19, COLUMN A)..... 4,303.39

Form CC-5(F) (Rev. 11/97)

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION
SCHEDULE E
LOANS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

Friends of Jun Abinsay

LOANS FROM CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD
2/15/99	Felipe P. Abinsay, Jr. 1260 Richard Lane, #B-516 Honolulu, Hawaii 96819		1,000.00	1,000.00	-0-
1. TOTAL OF LOANS FROM CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 16(a), COLUMN A).....			1,000.00		
2. TOTAL OF LOANS REPAID OR FORGIVEN THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 20(a), COLUMN A).....				1,000.00	
3. TOTAL OF LOANS FROM CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY AT THE CLOSING OF THIS REPORTING PERIOD.....					-0-

LOANS FROM FINANCIAL INSTITUTIONS

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF FINANCIAL INSTITUTION	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD
4. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 16(b), COLUMN A).....					
5. TOTAL OF LOANS REPAID OR FORGIVEN THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 20(b), COLUMN A).....					
6. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS AT THE CLOSING OF THIS REPORTING PERIOD.....					

LOANS FROM OTHER SOURCES

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF SOURCE OF OTHER LOAN	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD
7. TOTAL OF LOANS FROM OTHER SOURCES THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 16(c), COLUMN A).....					
8. TOTAL OF LOANS REPAID OR FORGIVEN THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 20(c), COLUMN A).....					
9. TOTAL OF LOANS FROM OTHER SOURCES AT THE CLOSING OF THIS REPORTING PERIOD.....					
10. TOTAL OF LOANS AT THE CLOSING OF THIS REPORTING PERIOD (ADD LINES 3, 6 AND 9 AND ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 1), LINE 8).....					-0-

Form CC-5(E) (Rev. 11/97)

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE H
EXPENDITURES AND FUNDRAISING EXPENDITURES (UNPAID)
CANDIDATE COMMITTEE**

NOTE: SCHEDULE H SHOULD ALSO BE USED FOR UNPAID EXPENDITURES THAT ARE BEING PAID. SEE BELOW LINES 4, 5 AND 6 FOR PAID EXPENDITURES AND FUNDRAISING EXPENDITURES.
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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

Friends of Jun Abinsay

DATE OF EXPENDITURE OR FUNDRAISING EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR	NEW UNPAID EXPENDITURE OR INCREASE IN UNPAID EXPENDITURE AMOUNT THIS PERIOD	NEW UNPAID FUNDRAISING EXPENDITURE OR INCREASE IN UNPAID FUNDRAISING EXPENDITURE THIS PERIOD	TOTAL OF NEW UNPAID EXPENDITURE AND FUNDRAISING EXPENDITURE THIS PERIOD
	PURPOSE OF EXPENDITURE OR FUNDRAISING EXPENDITURE			

1. NEW UNPAID EXPENDITURES THIS PERIOD.....	-0-		
2. NEW UNPAID FUNDRAISING EXPENDITURES THIS PERIOD.....		-0-	
3. TOTAL OF NEW UNPAID EXPENDITURES AND FUNDRAISING EXPENDITURES THIS PERIOD.....			-0-
4. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (DO NOT ITEMIZE. ENTER TOTAL HERE AND ON SCHEDULE B, LINE 2).....			440.30
5. TOTAL OF UNPAID FUNDRAISING EXPENDITURES PAID THIS PERIOD (DO NOT ITEMIZE. ENTER TOTAL HERE AND ON SCHEDULE F, LINE 2).....			-0-
6. TOTAL OF UNPAID EXPENDITURES AND FUNDRAISING EXPENDITURES PAID THIS PERIOD (ADD LINES 4 AND 5).....			440.30
7. NET CHANGE THIS PERIOD (SUBTRACT LINE 6 FROM LINE 3. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 22, COLUMN A)....			440.30

Form CC-5(H) (Rev. 11/97)

